

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

File with:  
 Iowa Ethics and Campaign  
 Disclosure Board  
 510 E. 12<sup>th</sup> Ste. 1A  
 Des Moines, Iowa 50319  
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

IA ETHICS AND  
 CAMPAIGN DISCLOSURE BOARD  
 2010 JAN 14 AM 10:22

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Stewart

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Roger Stewart

Political Party (if applicable)

Democrat

Office Sought

State Senate

District (if Senate or House)

13

<b>FORM</b> <b>DR-2</b> (Rev. 12/2009)	<b>DISCLOSURE</b> <b>REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1363
Logged In	<i>[Signature]</i>
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

*Vera Randall*  
 SIGNATURE OF PERSON FILING REPORT

563-652-6382  
 TELEPHONE

1-14-2010  
 DATE SIGNED

I AM FILING A January 19, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☒ 2

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 3,281.15

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below")

5,520.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 8,801.15

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")

5,000.00

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 3,801.15

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 700.00

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 41.78

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Stewart

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
1/8/2009	ID# 1363 CK# 1528	Sitipac 300 SW 5th St., Ste 200 Des Moines, IA 50309		\$100.00	<input type="checkbox"/>
1/8/2009	ID# 6146 CK# 1836	Homebuilders Association PAC 4201 Westown Parkway-Suite 250 West Des Moines, IA 50266-6720		250.00	<input type="checkbox"/>
6/11/2009	ID# 6118 CK# 2652	Iowa Optometric Association PAC 1454 30th Street, Ste 204 West Des Moines, IA 50266		250.00	<input checked="" type="checkbox"/>
6/11/2009	ID# 6052 CK# 3375	Independent Insurance Agents of Iowa PAC 4000 Westown Parkway, Ste 200 West Des Moines, IA 50265		250.00	<input checked="" type="checkbox"/>
6/11/2009	ID# 6073 CK# 1275	Iowa Medical Political Action Committee 1001 Grand Ave. West Des Moines, IA 50265-3502		150.00	<input checked="" type="checkbox"/>
6/11/2009	ID# 6058 CK# 4454	Iowa Chiropractic Society 1605 N. Ankeny Blvd-Suite 100 Ankeny, IA 50023		100.00	<input checked="" type="checkbox"/>
6/11/2009	ID# CK# 3711	Susan Cameron 600 Brentwood Dr. Waukee, IA 50263		100.00	<input checked="" type="checkbox"/>
6/11/2009	ID# 6056 CK# 3887	Bankers Unite in Legislative Decisions 8800 NW 62nd Avenue Johnston, IA 50131-6200		1,000.00	<input checked="" type="checkbox"/>
6/18/2009	ID# 6430 CK# 1623	Iowa Rural Water State PAC 4221 22nd Ave. E. Newton, IA 50206		100.00	<input type="checkbox"/>
9/10/2009	ID# 6067 CK# 4075	Iowa Health PAC 6750 Westown Parkway # 100 West Des Moines, IA 50266		250.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 2,550.00

TOTAL (If last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Stewart

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/10/2009	ID# CK# 4388	Steven Ackerson 1634 NW 131st St. Clive, IA 50325		\$100.00	<input checked="" type="checkbox"/>
9/10/2009	ID# CK# 4937	Kent Jorgensen 913 7th Ave. N Clinton, IA 52732		50.00	<input checked="" type="checkbox"/>
9/10/2009	ID# CK# 2547	Libby Goodman 1713 Ridgewood Dr. Morrison, IL 61270		20.00	<input checked="" type="checkbox"/>
9/24/2009	ID# 6098 CK# 3698	Iowa Bev Pac 321 E. Walnut Des Moines, IA 50309-2026		250.00	<input type="checkbox"/>
9/30/2009	ID# 9774 CK# 125	Peninsula Gaming Employee PAC P.O. Box 1750 Dubuque, IA 52004-1750		500.00	<input type="checkbox"/>
10/20/2009	ID# 6160 CK# 2403	Community Bankers of Iowa PAC 1603 22nd St., Suite 102 West Des Moines, IA 50266		1,000.00	<input type="checkbox"/>
10/20/2009	ID# 8431 CK# 7326	Kochpac-Koch Industries, Inc 600 14th St. NW, Ste 800 Washington D.C. 20005		500.00	<input type="checkbox"/>
10/28/2009	ID# 6059 CK# 3373	Iowa Committee of Automotive Retailers 1111 Office Park Rd. West Des Moines, IA 50265		100.00	<input type="checkbox"/>
11/24/2009	ID# 9736 CK# 3111	Iowan for a Skilled Workforce 707 East Locust Street Des Moines, IA 50309		250.00	<input type="checkbox"/>
12/3/2009	ID# 8548 CK# 1376	ITC Holdings Corp PAC--Michigan 201 Townsend Street, Suite 900 Lansing, MI 48933		200.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2,970.00

TOTAL (if last page of this schedule)

\$ 5,520.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for Stewart

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/30/2009	ID# CK# 1153	Senate Majority Fund 5661 Fleur Dr. Des Moines, IA 50321	Donation	\$ 5,000.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 5,000.00

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
Citizens for Stewart

Reset Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5/19/2009	Iowa Senate Majority Fund 5661 Flour Dr. Des Moines, IA 50321	Sen. Stewart	Postage for Des Moines Fundraiser	\$ 20.97	<input checked="" type="checkbox"/>
6/2/2009	Iowa Senate Majority Fund 5661 Flour Dr. Des Moines, IA 5032	Sen Stewart	Food for Des Moines Fundraiser	20.81	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	41.78

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

**RESET**

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Stewart

SCHEDULE

**F**

(Rev. 02/08)

LOANS  
RECEIVED  
& REPAY☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 700.00

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$

From Schedule E - TOTAL LOANS FORGIVEN \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 700.00

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(for Schedule F)